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INFO	RMATION	DISCLOSU	RE	Complete if Known		
	STATEMENT BY APPLICANT			Application Number	10/561,631	
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				First Named Inventor	Sonja Bromer	
				Art Unit	1611	
				Examiner Name	Frazier, Barbara S.	
(Use as many she	ets as necessary)				
Sheet	1	of	1	Attorney Docket: 1131-15-PCT-PA-TD		

	US PATENT DOCUMENTS				
Examiner Initial *	Cite No	USP Document Number	Publication Date (MM/DD/YYYY)	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate

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Examiner Initials*	Cite No 1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	ır T
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DATE CONSIDERED **EXAMINER**